

GENERAL INFORMATION

military and the Department	
Lovelock, NV 89419	
Length of residence in Nevada 39 years	
County in which you are registered to vote Per	rshing
Length of residence in the county in which you are	e registered to vote 39 years
COMPENSATION FOR EXT	TRA-JUDICIAL ACTIVITIES
Disclose the date, place, and nature of any extra-ju name of the payor, and the amount of the compensat sheets if necessary.	idicial activity for which you received compensation, the ion so received. See Canon 41(2)(a)(ii). Attach additiona
Date Nature and Place of	Activity Name of Payor Amount
None	
TRICO	OME
inc	<u>OME</u>
age or older. No listing of individual clients, custo	ed by each member of your household who is 18 years of mers, or patients is required. Income received from such as "professional services." See Canon 4!(2)(a)(iii)
Source of Income	Recipient
	Carol A. Nelsen
Wages - Pershing County	
Wages - Pershing County PERS benefit	Maurice A. Nelsen

REAL PROPERTY

proved vaca additional sh	nt land, a	essary.	commercial building, apartments, : Nature/Particular Use	Interest Holder
1465 Elm	hurst	Lovelock N	NV <u>Family member residen</u>	ce <u>Maurice & Carol N</u> el
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(a) the debit question 9 a retained by t	is secured bove, or (t he seller or <i>Name</i>	by a mortgage of the debt is on its assignee or of Creditor	CREDITORS whom you or a member of your house or deed of trust on real property which a security interest in a nodesignee. See Canon 41(2)(a)(v). Att	h is not required to be listed under notor vehicle for personal use was
(a) the debit question 9 a	is secured bove, or (t he seller or <i>Name</i>	by a mortgage of the debt is on rits assignee or	whom you or a member of your house or deed of trust on real property whic e for which a security interest in a n designee. See Canon 41(2)(a)(v). Att	h is not required to be listed under notor vehicle for personal use was ach additional sheets if necessary.
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(a) the debit question 9 a retained by the None List each bustrust, directors security representity. See Comments of the None	is secured bove, or (blue seller or Name seller or	by a mortgage of the debt is on rits assignee or of Creditor You in which you owner (in whole ne percent or m	BUSINESS ENTITIES or a member of your house of a member of your house of the total outstanding stock or additional sheets if necessary.	h is not required to be listed under notor vehicle for personal use was ach additional sheets if necessary. Name of Debtor olved as a trustee, beneficiary of a c, or holder of any class of stock or securities issued by the business

GIFTS, BEQUESTS, FAVORS, OR LOANS

Attach additional sheets if n Date	Name and Place of Gift	Name of Donor	Amour
None			
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THEREBY CERTIFY THAT TH	IE INFORMATION CONTAINED IN THI	S DOCUMENT IS TRUE AND COM	4P1.ETE.
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January 10, 2009	- Laron	a nacion	
Date		Signature	

Deliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700